NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101				345	690	=	690
Total Claims >20	203/103	19	-20 = ___	X	9	18	=	___
Independent Claims >3	202/102	3	-3 = ___	X	39	78	=	___
Mult. Dep Claim Present	204/104				130	260	=	___
Surcharge	205/105				65	130	=	130
English Translation	139							___
								820

TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = $ 820 _____

Less Filing Fees Submitted - $ _____

BALANCE DUE   = $ _____

Marcia Gordon

Office of Initial Patent Examination

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999	Application or Docket Number

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	19 minus 20=	*
INDEPENDENT CLAIMS	3 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		

	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
	RATE	FEE		RATE	FEE
BASIC FEE		345.00	OR		690.00
TOTAL CLAIMS	X$ 9=		OR	X$18=	
INDEPENDENT	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL		OR	TOTAL	690

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
	X$ 9=		OR	X$18=	
	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
	X$ 9=		OR	X$18=	
	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
	X$ 9=		OR	X$18=	
	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875
(Rev. 12/99)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE